

A detailed map of the Huntington, West Virginia area, showing the Kanawha River and surrounding towns. The map is color-coded with various shades of green, yellow, and pink. Key locations include Huntington, Cabell, and various smaller towns like Greenbottom, Lesage, and Coxs Landing. The map also shows the Ohio River and the Kanawha River. The map is titled 'Huntington' and 'Cabell'.

**Division of Addiction Sciences
Department of Family and Community Health
Joan C. Edwards School of Medicine
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DEF-WV-01447

Executive Summary

- Cabell County is uniquely positioned to study, address, and share information related to the crisis. It is the ideal laboratory in the nation's continuing search for reproducible solutions to the opioid epidemic.
- The national opioid crisis has hit Cabell County especially hard.
- The immediate impact of the crisis upon our community has been devastating.
- County leaders have rallied together with resources and strategies to respond to the crisis.
- Innovative solutions are starting to make an impact.
- Our community's collaborative efforts have gained national (and even international) recognition as a model for other suffering communities.
- There is much more that needs to be done to address the long-term impact of the crisis.
- Cabell County is uniquely positioned to address the crisis going forward based on our collaborative framework.
- Cabell County has extensive assets in place to support developing solutions to the multitude of problems directly resulting from the opioid crisis.
- These assets include, but are not limited to, a well-established and successful health care system, a Division 1 Public University with and R2 research designation, and supportive political leadership at all levels.
- The centerpiece of our plan is the development of an Addiction Sciences Institute which will house state-of-the-art research facilities, a center for education, foster researchers, and offices for representatives of all community stakeholders.
- The Institute and identified "Areas of Focus" will provide the foundation for developing immediate, short-term strategies as well as long-term solutions that foster sustainable recovery in the community.
- The Institute will be a place of shared concerns and ideas for all agencies, programs, and individuals in the County involved in responding to the opioid crisis and will serve as a conduit for funding the activities of the plan.
- Our plan outlines the main short-term and long-term goals of this collaborative effort and estimates reasonable costs in establishing solutions.
- The plan will remain flexible and organic, and ever responsive to the changing nature and understanding of the active crisis and its long-term effects.
- A recommendation regarding governance and accountability is included.
- The results of dedicated efforts of Cabell County will be shared nationally and internationally to reduce hardship of other communities suffering the effects of the opioid crisis.

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Acknowledgements

This document is the product of many contributors from throughout Cabell County who have been willing to share their expertise and experience in a common effort to share and build upon the solutions that have been developed to address the devastating impact of the opioid crisis in our community. The preparation of this brief was coordinated through the Division of Addiction Science in the Department of Family and Community Health at the Marshall University Joan C. Edwards School of Medicine. The following is a list of the organizations and community leaders who donated their time in support of the development of this important plan.

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City of Huntington
FaithHealth Appalachia
Huntington Regional Chamber of Commerce
Lily's Place
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Introduction

Creating Resiliency from a Community Opioid Crisis

A Framework for Healing a Community Negatively Affected by the Substance Use Epidemic and Instilling Resiliency to Protect Against Future Crises of this Magnitude

According to the Oxford English Dictionary, **Resilience** is “the capacity to recover quickly from difficulties; toughness”. The people of Cabell County define resilience. The tragic 1970 plane crash that took the lives of 75 individuals, including nearly the entire Marshall University football team and coaching staff, as well as many community members whose extended family continue to call Huntington home, challenged the community to come together in the wake of the worst sports related air tragedy in U.S. history. The university and the community have been forever united by their ability to rebuild from this heartbreaking event. This experience has provided the foundation for a uniquely strong bond between the community and its university that supports a sense of hope and determination in the face of overwhelming adversity.



More recently, Cabell County, WV, has been ravaged by the harmful effects of the substance use epidemic. This has culminated in increased drug activity, the highest rate of overdoses and overdose deaths our nation has seen, and poor health outcomes. It has left in its wake individuals, families, organizations and an entire community that must now determine how to promote and achieve health and wellness across the lifespan.

In response to this crisis, community members and leaders in Cabell County quickly took action through collaborative, innovative methods aimed at reducing overdoses, overdose deaths, and other negative outcomes, and increasing the number of individuals entering treatment and remaining in recovery. Still, with an epidemic this large, even the most impressive partnerships and response pale in comparison to the intergenerational waves of traumatic impact that such a crisis sends across generations and across social strata. Were the crisis to end today, the impact would continue for generations to come. There is still much work to be done. What has become evident is that developing these efforts has continued to demonstrate the distinct character of our community.

"The battle against the opioid crisis requires a coordinated, multi-faceted approach that is both flexible and continually responsive to the ever-changing face of the crisis and its impact on our community." –Dr. Stephen Petrany

Cabell County now seeks to fully develop a resilient community by sustaining the existing short-term approaches and establishing the long-term solutions necessary to fully recover and prevent this type of crisis in the future. We believe that this can best be accomplished through collaboration, innovation, capacity-building, sufficient funding and resources, and a people-focused and community-based approach. The initial successes of our extensive efforts make Cabell County and the city of Huntington uniquely positioned as a national leader in how struggling communities throughout the United States can effectively respond to the opioid crisis.

Areas of Focus

The following main areas of focus are recognized as necessary components of any comprehensive strategy to promote community resilience:



Where We Started

Substance use has become a public health crisis across the nation, becoming most apparent in the past five years, but beginning nearly two decades ago. Today there are many opioid crises in the U.S, differentiated by overall overdose rates and rates of growth in fatal overdoses from specific types of substances. The demographics, economics, and status of labor markets in individual communities also play a key role as contributing factors to the differences in opioid crises seen in local communities and geographies across the nation.

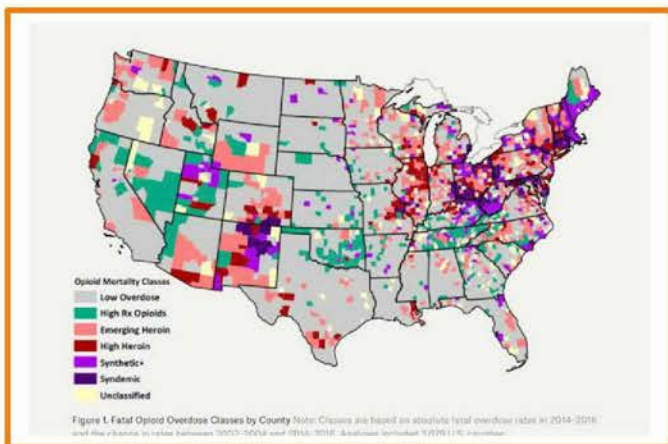
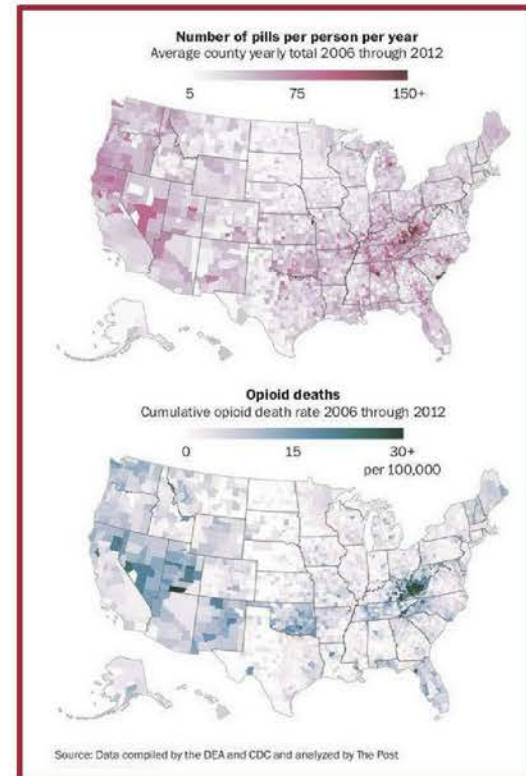
Among the types of opioid crises across the U.S., Cabell County is not classified as an emerging crisis or even as a high overdose community.* Cabell County is classified as a community considered the most challenging of all – a community facing a **syndemic** (“synergistic epidemic” where a set of linked health problems involving two or more afflictions contribute to excess burden of disease in a population) opioid crisis where the combination of high

overdose rates from multiple opioids has greatly exacerbated the crisis.

Communities such as Cabell that are classified as syndemic are facing multiple concurrent or sequential opioid crises and considered significantly worse, are of much greater severity and are the most challenging to address.

Even classified as a syndemic geography, Cabell

County has been able to accurately track data and statistics early on. Huntington readily recognized the severity of the issue seen in reported rates of overdose, overdose-associated deaths, and incidence of neonatal abstinence syndrome - the highest in the nation. There was also awareness and tracking of the sharp rise in the incidence of infections and other diseases associated with substance use, including hepatitis B and C, sexually transmitted infections, endocarditis, and most importantly- a recent HIV cluster. In Huntington, as heroin became more popular and widespread, and the rates of infection, infectious disease, overdose, and overdose death quickly increased, this culminated in a shocking outbreak of 27 overdoses in just four hours in the city of Huntington on August 18, 2016, attributed largely to fentanyl-laced heroin.



CNN

West Virginia city has 27 heroin overdoses in 4 hours
(CNN) There were 27 heroin overdoses within four hours, including ... to know at this point," Cabell County EMS Director Gordon Merry said.
Aug 18, 2016



*Source: <https://www.ineteconomics.org/perspectives/blog/place-based-economic-conditions-and-the-geography-of-the-opioid-overdose-crisis>

This highly publicized event further stimulated the community and key Huntington leaders, including elected officials, to develop additional strategies that would slow and eventually reduce the rates of overdose, overdose-associated deaths, neonatal abstinence syndrome, infections, and

"Cabell County may be deeply affected by the opioid crisis, but the community is resilient and making significant progress. With specific information about the population of people who inject drugs, the county is able to scale its services for the need."

SEAN ALLEN, DrPH, MPH
LEAD RESEARCHER

infectious diseases and demonstrate improvements in closing gaps in the continuum of care. While this is a huge point of pride and encouragement in the county's efforts to recover a syndemic community struggling with the damaging systemic effects of substance use, **there remains much work to be done.**

The substance use issue in Cabell County is multi-generational in its impact and will require additional resources directed at the long-term recovery of the entire community. Infants born with prenatal exposure may require a lifetime of support. Ongoing efforts are necessary to expand our understanding of the prevention, diagnosis, and treatment of substance exposure through the lifespan. Additional support is necessary to address the needs of children that are part of the more than 8,000 now displaced in West Virginia by parental substance use and those being raised in kinship or grandparent-headed homes. Many of the youth throughout the county have been adversely affected by parental substance use, peer substance use, self-use of substances, or the generally poor stigma and environment that currently exists in the city. These youth are at a high risk for substance use, and these risks must be mitigated as early on and effectively as possible. Moving forward, prevention is a priority for our community that has yet to be fully developed and implemented.



In America's drug death capital: How heroin is scarring the next generation

Story by Wayne Drieh and Max Blau, CNN
Photographs by Maddie McGarvey for CNN
Updated 5:45 PM ET, Fri September 16, 2016

Huntington, West Virginia (CNN) — Sara Murray tends to two dozen babies in



"I came to Huntington because it's one of the best stories in the United States in terms of recovery. If we can turn around overdose numbers here, we can do it anywhere," Adams said, speaking at Cabell Huntington Hospital's annual Regional Health Summit in Huntington. "I'm here to learn about what's working so I can share it with Washington, D.C., and the rest of the nation."

Substance use disorder is a chronic disease and must be treated as such, which requires a capacity and infrastructure that enables immediate access for those in active addiction and a lifetime of supports for those living in recovery. This will require extensive funding for access to treatment and healthcare, increased education and job opportunities, and more comprehensive social supports.

Huntington, WV, which comprises 52% of the population in Cabell County, is becoming recognized nationally and internationally as a city of solutions and an example to other communities. Kim Darrach, the former British Ambassador to the US, said of his visit to Huntington, "What is happening here will be the model for the path we should follow." Long-term recovery for our community means supporting a generation of

individuals that have risen above the era of substance use through individual long-term recovery as well as through the rejection of the initial first use of any of these substances. Over the next several decades, Huntington and Cabell County seek to create a healthy community that promotes healthy people and healthy families.

Addressing the substance use crisis must incorporate strategies that will address the more deeply rooted socio-economic and healthcare issues that affect the majority of our population. This will require continued efforts by and funding sources for the local government, healthcare organizations, business community, local nonprofits, and education institutions in our city. The funding we have been able to acquire to achieve these successes is limited both in the scope of programs it can address and the sustainability of those it does address. Significant funding is needed to coordinate, implement, evaluate, and replicate successful interventions across the lifespan. Cabell County has the solutions to not only help our community but make lasting changes in other local communities across the nation.



Where We Are Now

Cabell County decided early on to confront the opioid issue head-on. Local community leaders, including elected officials, recognized the problem and collaborated to address it, beginning by properly recording and tracking key indicators such as overdoses, overdose deaths, criminal activity specific to illegal substances, and drug use trends. This information has been invaluable in determining how best to move forward in a data-driven and evidence-based manner. Additionally, the continued gathering of any and all information pertinent to the substance use crisis and the programs and initiatives developed to address it, has positioned Cabell County, WV to leverage standard data collection and evaluation to develop best-practices and evidence-based approaches.



Cabell County, WV, has also established strong community partnerships as part of the foundation for addressing substance use and a vision for creating a resilient population and environment. The county is uniquely positioned with the assets of Marshall University, the Joan C. Edwards School of Medicine, and the Mountain Health System that includes two major hospitals all within the highest populated area of the county. In addition, Cabell County has strong well-established partnerships in place, including first responders, the faith community, homeless continuum of care, judicial system, law enforcement, the business community, and local government. This has enabled implementation of an integrated, system-level response to the substance use crisis. The approach taken in Cabell County also allows all of the programs or initiatives developed to be easily adapted in other communities across the nation as they seek to replicate our resources.

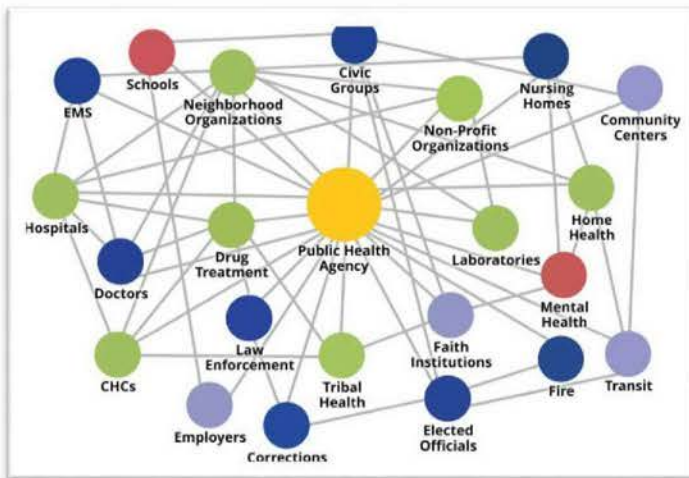
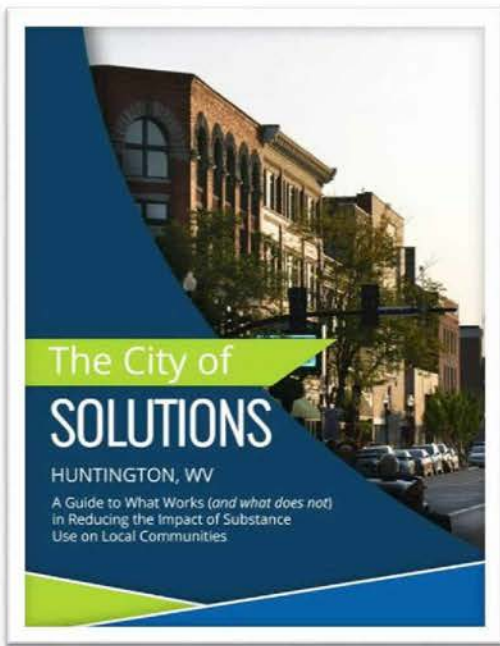


Image Source: <https://www.cdc.gov/publichealthgateway/publichealthservices/images/public-health->



There has already been widespread interest across the United States in replicating the services we have initiated in the past several years, with many individuals and organizations reaching out for information regarding our programs and successes. Due to this overwhelming interest, a private foundation reached out to Marshall Health in Huntington, WV to develop the 'The City of Solutions' guidebook, detailing programs and strategic initiatives implemented over the past several years to address various aspects of the substance use crisis. This guidebook now serves as a comprehensive resource for other communities seeking to replicate programs to address substance use disorder in their own communities. Supported by two leading philanthropic foundations in West Virginia, the guidebook will be shared across the state through community-based meetings in the fall of 2019. Cabell County is setting the standard for comprehensively addressing substance use and has been well-recognized for these efforts.

However, **we are just at the beginning of what will be a prolonged effort** to cope with the individual, family, and community effects of the opioid epidemic. Cabell County is uniquely positioned to study, address, and share information related to the crisis. Cabell County is the ideal laboratory in the nation's continuing search for reliable solutions. This is due in no small part to the multitude of community assets that can be brought to bear on the issue. These community assets include: strong collaboration among a large healthcare system, substantial social service capacity, respected academic institutions, supportive local government, an active faith community, engaged law enforcement, experienced first responder support, initiated innovative collaborative approaches, and an established research infrastructure. Such components set Cabell County, WV, apart from the rest of the nation. Our crisis has been the worst, and our united response and successes have been the most impactful. The unique level of collaboration among the medical institutions, the academic institutions, and the political institutions of our county have brought national and international recognition to the quality of our growing efforts. We are equipped and eager to continue achieving success by executing a mass-scale community wellness plan that reduces the impact of substance use and creates a truly resilient community.

"Cabell County is uniquely positioned to study, address, and share information related to the crisis. Cabell County is the ideal laboratory in the nation's continuing search for reliable solutions."

Substance use in Cabell County has permeated beyond affecting only those individuals struggling with substance use and has negatively affected the entire community.

- Community members voice fear of personal safety, drug-related criminal activity, and the impact of the opioid epidemic on local neighborhoods
- Politicians and policy-makers struggle with the substance use issue overshadowing other important issues for the community
- A majority of family members, friends, coworkers, and acquaintances in the community know someone struggling with substance use and experience their own issues and trauma due to these relationships

 Catholic News Service

Opioid crisis reaches all corners of West Virginia, leaving few untouched

Opioid crisis reaches all corners of West Virginia, leaving few untouched ... "In Cabell County, there are 178 overdose deaths per 100,000 people. ... for Learning and Advancement in Huntington, and found a distressing trend ...

- First responders are overwhelmed, fatigued, and utilizing a vast amount of resources on overdose events and criminal activity regarding illegal substances
- Others such as healthcare professionals, correction officers, social service providers, and public defenders are also experiencing compassion fatigue
- Business owners and employers worry about the financial impact of being located in an undesirable community, as well as the lack of a safe, competent workforce
- The faith community voices concern of a need to be better prepared to aid those who come to them for help or guidance regarding substance use
- Teachers and daycare workers are not trained on the special needs of children with a history of prenatal or environmental exposure to substances
- The healthcare community is working diligently to incorporate substance use treatment and prevention into all entry points to the healthcare system, while at the same time experiencing high rates and cost of substance-use related hospitalizations and care

What is needed in Cabell County, WV, to create a resilient community to address the current substance use crisis and prevent this type of crisis from occurring in the future?

- Addiction Science Institute
- Education for all members of the community and healthcare professionals
- Transportation system to reduce barriers and improve access to healthcare, treatment, recovery, social supports, and wellness components of care
- Expansion and sustainability of comprehensive harm reduction services
- Increased and expanded outpatient services and care coordination
- An educated and integrated active faith community
- System for better addressing childcare as a barrier to treatment, recovery, and employment
- Increased and expanded capacity and infrastructure for inpatient/residential treatment
- Implement coordinated, community re-entry efforts and legal supports to reduce recidivism and increase the number of individuals being productive members of society
- Increase and expansion of mental health services
- Intensive, wrap-around social supports
- Safe, supportive housing
- Increased and expanded prevention and early intervention efforts
- Research-related funding and capacity-building
- Data collection and evaluation of the entire community both now and in the future
- Focus on reducing compassion fatigue in and better equipping first responders
- Framework for the revitalization of current businesses and investment in new businesses/employment opportunities
- Increased capacity-building for education and vocation preparation for adults
- Expansion and sustainability of grant-funded programs/initiatives currently successful in combatting substance use

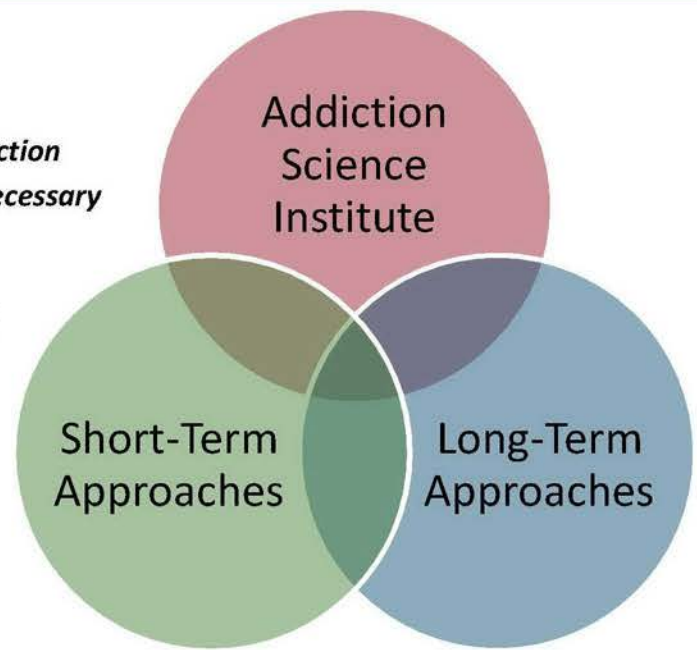


Framework and Organizational Structure

Addiction Science Institute

Plan: Develop a centralized facility known as the Addiction Science Institute that will house all of the resources necessary to ...

- Continue to build understanding of the efficacy of existing efforts through evaluation
- Improve public health and reduce disparities
- Advance basic, clinical, population-based, and policy-relevant research
- Develop innovative ways to identify emerging drugs trends
- Provide technical assistance to local and state agencies
- Provide training and workforce development to students and current health professionals
- Foster strengthening of existing community collaborations and partnerships
- Disseminate advancing information on evidence-based methods of prevention, treatment, and management of substance use disorders
- Publish results of research and clinical initiatives (medical and behavioral)
- Address the problem of stigma through the education of community populations
- Forum for policy development and action (local, state, national).



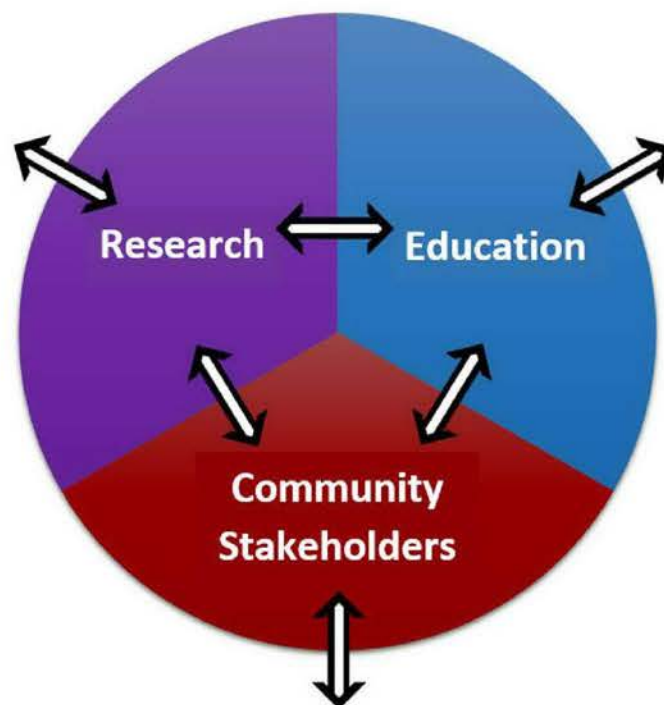
The development of an Addiction Science Institute (the Institute) provides the centerpiece of this resiliency plan. The Institute will deliver a community-based cornerstone for collaboration and communication by all stakeholders in the fight against the opioid epidemic. The new facility would include space for advanced research, education, and representative offices for all community partners devoted to these overall efforts. The Institute's work would guide the resiliency plan going forward, in response to the changing needs and changing understandings of the battle against the impact of the opioid epidemic over the ensuing years. It responds to our recognition of the importance of continual evaluation and assessment of the shifting nature of the crisis, as well as any and all supported projects, in order to make evidence-based adjustments along the path toward achieving future success.

The Addiction Science Institute will be administered by Marshall University's Division of Addiction Sciences and will draw upon well-established community resources, including but not limited to: Marshall University, the medical school, the pharmacy school, the physical therapy school, the local hospitals, multiple local agencies engaged in the response to the opioid crisis, and local

healthcare providers. It will serve as a community-based entity available to every organizational partner contributing to reducing the impact of substance use and creating a resilient community in Cabell County.

The Institute will house representatives from the community from areas such as law enforcement, first responders, local healthcare providers, prevention, outpatient and inpatient/residential treatment providers, social services, the faith community, the local Chamber of Commerce, individuals in recovery, and the education system, as well as Marshall University faculty and researchers. In partnership with Marshall University, this Institute can equip our community with the personnel, equipment, and resources our community needs to explore important areas of research that need to be addressed. The Institute will also coordinate existing efforts.

Another key aspect of the Addiction Science Institute is an area dedicated to community outreach. For the local professional healthcare students, there would be space to gain specialized education from the center of addiction science. For the community, there would be public spaces for the hosting of trainings and meetings to provide an evidence-based education on addiction. This would serve to expand needed addiction-specific capacity among healthcare providers, reduce misinformation, and reduce the harmful effects of stigma related to substance use so prevalent in the community. Offices co-located in the Institute will further enhance our collaboration and partnerships in addressing all of the growing community needs associated with addiction and one that is building resilience. This will also provide the information necessary to promote best practices throughout the community's recovery efforts and enable us to disseminate this information to similar communities throughout the nation.



Short-Term Approaches



Implement systems-level approaches to reducing the immediate physical, behavioral, and social needs of infants and children adversely affected by opioid use



Utilize and disseminate evidence-based substance use education



Implement innovative strategies to reduce transportation as a barrier to health and wellness - particularly as a barrier to receiving SUD treatment and recovery services



Sustain and expand comprehensive harm reduction services



Expand outpatient service capacity for SUD treatment



Implement innovative strategies to reduce childcare as a barrier to treatment, recovery, and employment



Expand inpatient/residential service capacity for SUD treatment



Implement coordinated reintegration strategies and legal supports to reduce recidivism among individuals in SUD treatment or recovery



Increase the workforce for and expand access to mental health services



Provide intensive, wrap-around social supports needed as a result of the opioid crisis



Develop a more comprehensive system for providing safe, supportive housing

Plan: Implement systems-level approaches to reducing the immediate physical, behavioral, and social needs of infants and children adversely affected by opioid use

With some of the highest rates of Neonatal Abstinence Syndrome (NAS) and Neonatal Opioid Withdraw Syndrome (NOWS) in the nation, opioids have caused significantly negative physical consequences in children with prenatal exposure. Additionally, environmental exposure to opioids, primarily through parent/guardian use, has immediately serious consequences on infants and young children and their development.

Infants with NAS, NOWS, or any evidence of prenatal exposure experience a myriad of poor health outcomes from birth. Long, intensive hospital stays, CPS investigations, and isolation are just a few of the consequences of these poor health outcomes. These cases are not only detrimental to the early development of these children, but also come at a high financial cost to taxpayers, hospitals, and families. Further developing and implementing evidence-based models that are cost-effective and provide optimal care for these infants is an immediate concern of the entire community.

The large numbers of young children in the early stages of development who had prenatal exposure to opioids are unprecedented in this area and require their own unique interventions. Our current daycare and early education facilities and schools are struggling with a lack of available resources for dealing with these children and their unique needs. There is a desperate need for both specialized care and research on the physical, behavioral, and mental wellbeing of these children.

Children of all ages who are regularly exposed to parent/guardian opioid use are highly susceptible to Adverse Childhood Experiences (ACES) that in turn, increase their own risk factors for substance use. The resulting unstable home life of these children is correlated to poor health and wellness outcomes of all kinds, further perpetuating the multi-generational impact of this opioid epidemic.

The immediate implementation of child interventions addressing opioid use could reduce both the number of children adversely affected and the extent to which these children are adversely affected. These interventions will require expanded school-based efforts, mentorship programs, quality after-school programs, specialized clinical and behavioral services for children below school-age, and expanded services for the care of infants with prenatal exposure.

Plan: Utilize and disseminate evidence-based substance use education.

Spreading community awareness and correct health information, particularly surrounding substance use and those who suffer because of it, is an integral part of good population health. When done properly by the proper individuals, health education can substantially aid in promoting health. Regarding substance use, it can decrease stigma, which reduces barriers to accessing treatment. It also equips citizens with the basic knowledge necessary to aid in a situation involving substance use or overdose, which can potentially save lives, as well as aid or refer any individual they come across experiencing a substance use disorder.

Many individuals in the community may become more helpful to those with SUD, become more willing to house or employ individuals with SUD, or be generally supportive of efforts to reduce substance use if they are properly educated on the issue. This promotes existing city-wide efforts. There is plenty of misinformation available throughout the community, particularly in social media. Access to health education in places such as the potential Addiction Sciences Institute could provide the community with quality information from experts in the field and ultimately aid in improving the health and wellness of the community.

Increasing medical and behavioral clinical capacity requires a robust system of education and support for health care providers at various levels of training and practice. The development of an effective and accessible means for such training across multiple disciplines and stages of development is critical to the success of our efforts.

In addition to general education concerning substance use, naloxone education continues to be a priority in the midst of the substance use epidemic. Making naloxone more available throughout the community requires members and organizations within the community to be open to the training, which will require the use of community engagement specialists. Even those who are not ready to carry naloxone should be educated on the reasoning for why it is an important tool to have out in the community.

Plan: Implement innovative strategies to reduce transportation as a barrier to health and wellness- particularly as a barrier to receiving SUD treatment and recovery services.

Cabell County and its surrounding areas are in the heart of the Appalachian region- an area with deeply geographically isolated populations. As one of the most populated counties in the state, Cabell County still has very rural areas of the county where transportation is a challenge and barrier whether it is to access healthcare services, employments, etc. The transportation is compounded by limited public transportation, generally low income that is insufficient to afford cars or private transportation, and widespread community resources that are not walkable. Individuals cannot be successful in achieving health and wellness if they are unable to reach healthcare provider facilities, grocery stores, pharmacies, work, childcare, or any other daily-living stops.

Transportation has been a consistent issue across the entire spectrum of individuals and organizations addressing substance use recovery. In order to overcome this barrier, there needs to be an established coalition of community leaders who can lead implementation of innovative transportation strategies in the short-term while implementing a transportation network that is sustainable in the long-term.

Plan: Sustain and expand comprehensive harm reduction program services.

The Cabell-Huntington Health Department has been an integral part of curbing the negative effects of the substance use epidemic. With a high number of individuals served, this program has been successful in reducing disease transmission through comprehensive harm reduction program services, including naloxone education and distribution, family planning services, expanding STI and

other infectious disease screenings, providing vaccinations, a syringe service program, and general medical care, and incorporating peer-recovery coaches to increase referrals into treatment. Despite all of these successes and a continued need, there is a tight budget and limited funding for current services, with no room for expansion.

Cabell County is on the cusp of various epidemics, with an already dangerous HIV cluster identified in the county. Increasing harm reduction services is necessary to slow down and reduce the spread of infection in our population. This needs to be done through increased funding for the harm reduction services including funding for mobile services to reach the rural areas of the county. Mobile harm reduction services could be instrumental in both reducing the impact of substance use and promoting recovery options to previously unreached parts of the county.

Plan: Expand outpatient service capacity for SUD treatment.

Outpatient services are the most accessible form of treatment for most individuals in recovery. They are also more cost-effective than most inpatient/residential forms of treatment. These services have been implemented successfully in Huntington through various healthcare providers. Despite this, there remains a desperate need for expanded capacity, specifically for Medication Assisted Treatment (MAT) providers and therapists county-wide. Training, hiring, and providing the space for MAT services both in Huntington and the more rural towns, incorporated, and unincorporated communities in the county would increase the number of individuals in treatment and recovery services and reduce barriers to accessing such services.

Within the outpatient services currently available, there is a need for expansion of services offered alongside standard treatment to promote sustainable recovery. Examples of needed services include access to and navigation of social supports and obtaining employment, which will require additional capacity of personnel and resources. Outpatient services are also needed in more rural areas through the use of mobile services or additional sites.

Plan: Implement innovative strategies to reduce childcare as a barrier to treatment, recovery, and employment.

Many of the local individuals seeking services and those service providers have encountered childcare as a major barrier to entering treatment, maintaining appointments, and re-entering the workforce in their efforts to maintain recovery. Safe, affordable, accessible childcare is out of reach for many individuals, particularly in the low-income Appalachian region. Facilitating this type of childcare through vouchers, expansion of proper childcare facilities, and adequate transportation would reduce a major barrier to recovery that disproportionately affects families with substance use disorders that have young children.

Plan: Expand inpatient/residential service capacity for SUD treatment.

For some individuals with substance use disorders, there is a need for a higher level of care than traditional outpatient services can provide, especially for individuals with intense co-occurring disorders. Certain hospital facilities need to be expanded to accommodate inpatient services for

individuals in need of treatment with prolonged hospital stays, patients admitted to the hospital with severe mental health issues in addition to their substance use, as well as infants with prenatal exposure and their mothers. Initial expenses for these renovations/expansions would be costly, as would long-term care, but these costs could be minimized by proper billing and protocols. This type of care could also reduce long-term healthcare costs by providing more intense initial treatment that reduces the need for repeat visits.

In addition to the general inpatient/residential capacity that needs to be built out for our community, there is a need for tailored residential services to address special populations such as the individuals experiencing homelessness, those who are chronically ill, and individuals with a disability, among others. The individuals in this category are largely underserved and have unique circumstances that require a specialized, intensive, wraparound approach.

Transitional housing that offers a step-down level of care for individuals who complete inpatient/residential services is also a high need for both the general population and special populations that are able to take a more independent step in sustainable recovery. This requires the coordination of case navigators and stable housing without the full-time treatment component previously experienced. Establishing community-based models for transitional housing is a priority of Cabell County in the continuum of care.

Plan: Implement coordinated reintegration strategies and legal supports to reduce recidivism among individuals in SUD treatment or recovery.

While there are several localized efforts to address re-entry in Cabell County, these efforts have had little support, little direction, and poor community buy-in. These efforts are also negatively impacted by stigmatizing community attitudes regarding SUD and those who battle it. Investing in these efforts through personnel participation and funding could begin to incorporate levels of change in our community regarding recidivism and successful re-integration into society.

Many individuals enter the legal system through drug-related crimes, and many individuals leaving the legal system easily fall back into drug-related environments. Properly addressing substance use among inmates, preparing these individuals to re-enter society through social supportive services and treatment and recovery services, and facilitating a sustainable recovery through housing and employment is vital to reducing drug-related recidivism. This can be accomplished with improved efforts to integrate treatment and recovery with court system and judicial system-populations.

In addition to correctional improvements and treatment/social services, legal barriers desperately need to be addressed in re-entry. One of the major barriers to re-entering society as a previously incarcerated individual is the complicated legal process associated with identification, housing, gainful employment, and receiving social supports. Breaking down barriers to success and resiliency in re-entering society will simultaneously break down many of the same barriers to success and resiliency in recovering from substance use disorders.

Addressing re-entry also requires addressing halfway houses and sober living homes. Many individuals are released from the legal system into these types of facilities, regardless of whether there are proper treatment and recovery protocols in place. Peer recovery coaches and case managers trained regarding substance use and the local resources are a necessary part of successful re-entry efforts.

Plan: Increase the workforce for and expand access to mental health services.

Addressing mental health is a key component to addressing, preventing, and treating substance use disorders. Substance use treatment options that do not properly address the mental health component of an individual's recovery are not sustainable. Additionally, for individuals for whom substance use is never associated with their mental health issues, a healthy, resilient community still requires properly addressing mental health at every level of severity.

Increasing the number of available mental health services, as well as the accessibility of those services, largely depends on the mental health workforce available in the community. Cabell County is a HRSA-designated Health Professional Shortage Area for mental health. This must be resolved in order to properly address mental health service needs throughout the county and increase the effectiveness of any opioid related recovery efforts. Training, recruiting, and providing the resources necessary for these mental health workers is an immediate need.

Plan: Provide intensive, wrap-around social supports needed as a result of the opioid crisis.

Successful recovery and successful healthy living as a whole is dependent upon having the proper social supports in place. When individuals from such a vulnerable population are seeking a better life, the systems and resources available to them are often too difficult to navigate on their own. The availability of case management and certified peer support specialists is a crucial first step in providing wrap-around social supports. Incorporating these case managers into various settings that have previously been unbillable is necessary to curb substance use and increase community wellness. These are especially necessary in the most difficult-to-serve populations, such as those experiencing homelessness.

With case managers and certified peer support specialists in place to aid individuals anywhere along the continuum of care- whether they are on the street, in a shelter, in treatment, or in long-term recovery- the community can develop more services specific to the various needs of the population. Finding housing, obtaining health insurance, gaining employment, obtaining legal aid, entering treatment, attending medical appointments, acquiring proper mental health services, and many other issues are capable of being addressed with proper funding, navigation, and guidance. By aiding those among us with the most intensive needs, we can alleviate a large amount of community resources.

Implementing and expanding the care coordination efforts currently being developed in Cabell County and the southern WV region could provide a solid foundation for wrap-around services

geared toward creating sustainable, healthy communities. Models for approaching treatment and recovery through proper care coordination will promote higher long-term success.

Plan: Develop a more comprehensive system for providing safe, supportive housing.

Addressing an individual's most basic, vital needs is always a necessary first step before addressing other serious or less-important needs. For individuals with substance use, safe, supportive housing is necessary in order to achieve sustainable recovery. The home is often representative of one's overall health and wellness. The complications associated with homelessness are often difficult to overcome and compounding those complications with those associated with substance use recovery, makes success less likely.

In addition to those who are currently unhoused, there are substantial numbers of individuals in our community who are housed unstably. Many individuals living in houses that are unsafe are in environments that make it difficult to achieve sustainable recovery and success. Achieving a healthy community is not possible without healthy neighborhoods and homes.

Due to the SUD epidemic, Cabell County lacks adequate resources to develop safe, affordable, accessible housing and provide reasonable methods for obtaining and sustaining that housing. Cabell County is in need of programs in place to develop safe, affordable, accessible housing and provide reasonable methods for obtaining that housing. This will likely need to be coordinated through the homeless coalition, local authorities, and business community. Investing in the revitalization of neighborhoods, tearing down unsuitable houses, rebuilding of salvageable houses, and development of well-integrated homes and apartments throughout the community is a necessary start to achieving safe, supportive housing.

Long-Term Approaches



Develop protocols and resources for ensuring comprehensive care of the life-long physical, behavioral, and social needs of infants and children adversely affected by opioid use



Increased and expanded prevention and early intervention efforts



Research-related funding and capacity-building to define what works and disseminate best-practices



Data collection and evaluation of the entire community both now and in the future



Focus on reducing compassion fatigue in and better equipping first responders



Coordinated efforts between legal/judicial system and healthcare system to reduce substance use



Framework for the revitalization of current businesses and investment in new businesses/employment opportunities



Increased capacity-building for education and vocation preparation for adults



Expansion and sustainability of current grant-funded programs/initiatives currently successful in combatting substance use



Expand services to combat multi-generational effects of adverse childhood and family experiences

Plan: Develop protocols and resources for ensuring comprehensive care of the life-long physical, behavioral, and social needs of infants and children adversely affected by opioid use.

The multi-generational effect of the opioid epidemic on our community is one of the most difficult consequences to address. Our infants and children, as well as the decades of infants and children to come, will be suffering these consequences long past the implementation of our current efforts. Putting in place the infrastructure to reduce the impact of opioid use long-term is the main priority and center-piece of much of this proposal.

The primary prevention of opioid use affecting children is to be attempted through many different pathways that reduce the number of children born with prenatal exposure as well as reduces the number of youth who ever first use opioids. The secondary prevention of opioid use affecting children is to be accomplished through best-practices in the healthcare and education systems that use widespread screening and early intervention tools. Protocols and resources that capture this population of children as early as possible will promote the children's health and wellness and reduce the negative long-term effects caused by opioids.

Tertiary prevention of opioid use affecting children has the potential to be among the most difficult and costly efforts in this proposal. With the number of opioid-affected infants and children currently unknown and the magnitude of their long-term physical, behavioral, and social needs unprecedented, Cabell County must address all areas of expected outcomes for their future. This will continue to be an area of research in our community that will not only promote good health outcomes in children adversely affected by the opioid epidemic, but aid in developing long-term approaches that close the gaps in the continuum of care of these children across their lifespans.

Plan: Increased and expanded prevention and early intervention efforts.

Prevention is a high priority of Cabell County, WV, that has the attention of all stakeholders involved in the development of a resilient community. It must be a high priority for any plan designed to address the opioid crisis we face. The combination of poor socio-economic living conditions and high rates of substance use in our community has created an unprecedented generation of at-risk youth. Enhancing individual and peer resilience through prevention-focused initiatives is crucial to reducing the long-term impact of opioids on our community.

The nationwide availability of resources to target preventative efforts has been inadequate; a serious concern for an area as susceptible to substance use as Cabell County, WV. Prevention of future substance use, prenatal exposures, overdoses, and overdose deaths is a necessity that we have been previously unable to invest in. With the proper resources, the county intends to not only put measures in place to minimize the effects of substance use on future generations, but to also equip the community with measures that promote a general wellness that is preventative of a multitude of co-occurring public health concerns that both perpetuate and result from substance use.

As with prevention, early intervention is an area of focus that struggles to receive attention amidst all of the current efforts to reduce opioid substance use. The harm reduction program within the city has been largely successful in providing intervention among individuals with advanced substance use, but there is a need for resources and programs directed at intervening much earlier in the continuum of care, particularly in teenagers and young adults.

Plan: Research-related funding and capacity-building to define what works and disseminate best-practices.

There are many areas of research surrounding substance use that are immediately relevant to our community, will better equip other communities like ours, and will be essential and relevant in future generations. Research of the current local environment and programs surrounding substance use needs to be prioritized, and future research needs to be prepared for and planned.

Research is a priority of the entire community and is important in establishing the details that led up to this substance use crisis, where we are now, what efforts are successful, how to aid other communities, and how to prevent such a crisis from happening again. By housing addiction research efforts under one roof that is not owned by any one entity, such as the Addiction Science Institute, we can put an infrastructure in place to maintain comprehensive, up-to-date, community-owned databases for various research plans, ensure that there is a high-level of collaboration across organizations, and link the most appropriate individuals for pursuing various research plans. A robust research staff is necessary to accomplish this goal.

In addition to the research performed by the existing parties invested in addressing substance use, the institute could provide research opportunities for pre-professional students and current professional healthcare students to grow the research capacity of the local academic institutions. This would also grow a workforce of research-capable individuals for future employment and attract students to attend schools with this resource.

Plan: Data collection and evaluation of the entire community both now and in the future.

Short-term and long-term research spans every area of the community and would require effective communication and collaboration to be executed effectively. In order to accomplish this, there is a need to invest in recruiting, training, and staffing individuals that can properly manage and coordinate the large amount of data regarding substance use and wellness in our community.

The more comprehensive, collaborative, and constantly updated data we have available to the community, the more able and equipped we will be to provide best-practice care and address the most important needs in the community.

Plan: Focus on reducing compassion fatigue in and better equipping first responders.

Across the entire nation, compassion fatigue is creating an unhealthy working environment for first responders such as law enforcement, firefighters, emergency personnel, and ER nurses. Opioid overdoses and other substance use-related incidents have caused a spike in traumatic

emergency calls and situations that are not only negatively impacting the first responders, but the individuals and community they are serving. First responders see the worst parts of the substance use epidemic and receive little to no supports for how to cope, and do not see the recovery side of this epidemic which shows promise and hope.

Putting in more comprehensive services and better equipping our first responders to thrive in their duties despite the difficulties associated with substance use is necessary to maintain healthy, safe workers and healthy, safe communities. Established and recently implemented compassion fatigue services designed to create mental and physical wellness among the first responders need to be further supported and expanded. There are groups of individuals experiencing high levels of compassion fatigue that are currently unreached even beyond the first responders, including (but not limited to) emergency service personnel, nurses (particularly those in the ERs), corrections officers, social service providers, and public defenders. Overdoses and drug-related crime have created a toxic environment for first responders and others involved in the care of individuals suffering from opioid addiction. It is pertinent that in our efforts to address the substance use epidemic and create a resilient community, we work to reduce and improve the detrimental impact of substance use on all affected.

Plan: Coordinated efforts between legal/judicial system and healthcare system to reduce substance use.

Criminal drug activity is an ongoing concern for Cabell County residents in the midst of the substance use epidemic. Public safety is a crucial part of health and wellness for any population, as well as a community's business environment and economy. In order to promote safe, healthy, resilient communities, there is a need to coordinate efforts between law enforcement, the justice system, and the healthcare system.

These efforts should focus on best-practices for law enforcement engaging individuals with substance use and substance use-related incidents, advocacy and best-practice for those encountering individuals in the legal system due to substance use, and providing the support our law enforcement and judicial/legal workers need to serve the community. Constant communication between the healthcare organizations and providers addressing substance use and those involved with the law/legal/judicial side of substance use needs to be cultivated. Additionally, there needs to be a constant sharing of successes and concerns between these populations. This will be facilitated through the collaborative partnerships of representatives within the Addiction Science Institute.

Plan: Framework for the revitalization of current businesses and investment in new businesses/employment opportunities.

Due to the high rates of substance use in our community and associated events such as overdoses and crime, current businesses in Cabell County have been negatively impacted. Additionally, there is a negative impact on bringing in new businesses, as the environment is perceived as highly unfavorable to most investors and business owners. This issue then perpetuates

the substance use crisis, as many good jobs have become uncompetitive and unavailable, leaving individuals more susceptible to continuing in or returning to substance use.

One of the major reasons that new businesses are not attracted to any given area is the unavailability of a ready workforce. In conjunction with efforts to create a safer physical environment, Cabell County needs to create a more skilled, employment-ready population. The community intends to develop resources that would equip individuals in recovery to become these skilled workers and equip employers with favorable offers of employment to these individuals. Mutually sustainable employment opportunities for both employees and employers could work to revitalize current businesses and attract new businesses.

Plan: Increased capacity-building for education and vocation preparation for adults.

The Cabell County communities are at-risk for or in the middle of experiencing a multitude of poor public health outcomes and medical issues associated with the substance use epidemic. The socio-economic and environmental factors that perpetuate this cycle of poor wellness and high drug use throughout the community include poor housing, low education and employment, poor healthcare access, and poor family units, among others. Cabell County has implemented programs that seek to address the education and employment issues that are both preventative of poor health outcomes and part of the recovery process for many individuals to lead sustainable lives. By investing in the education and employment of individuals in recovery and individuals with low employment motivation or opportunities, we can begin to break the cycle of substance use, generational poverty, and poor health.

Sustaining and expanding the mission and services these programs is a priority for Cabell County. The limited resources and staffing dedicated to this program, while successful in their beginning efforts, are insufficient for the large number of individuals affected by substance use throughout Cabell County. Additionally, there is a need for additional services beyond the current scope of developed programs that are vital in preparing and training adults for the workforce.

Creating a community with more stable sources of income through an investment in education and vocation aids in reducing the frequency of relapse, eases the financial burden of local government, eases the financial burden of local healthcare communities, promotes more sustainable family systems, lowers the risks for poor health outcomes, increases the general health and wellness of the community for current residents, and works to attract and recruit more talented individuals from outside of our region.

Plan: Expansion and sustainability of current grant-funded programs/initiatives currently successful in combatting substance use.

It is vital that Cabell County's current programs and initiatives that have been successful in slowing the aggressive growth of substance use, overdoses, and overdose deaths by increasing the number of individuals in treatment and recovery are maintained. The majority of these programs and initiatives are funded through temporary, limited grant awards. In order to move forward in

addressing the gaps in the continuum of care being created in our community, we must first reinforce and sustain the efforts currently addressing areas of need.

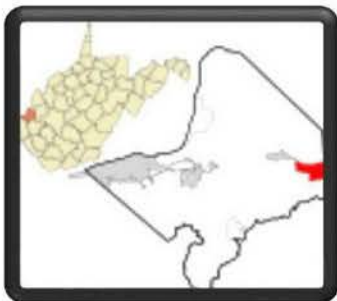
Plan: Expand services to combat multi-generational effects of adverse childhood and family experiences.

The effects of the epidemic will no doubt impact individuals, families, and communities for decades to come. Therefore, it is our priority to ensure that the results and standards set through these plans combat opioid use and its widespread effects for generations to come. Whatever is achieved through this proposal will by necessity be transferred to following generations. Creating a resilient community over the next several decades requires that we instill resiliency in our children and families and work diligently to minimize adverse childhood and family experiences that lead to risk for opioid addiction.

For the County, the Region, and the Nation

Cabell County, West Virginia, is the Appalachian region's nerve center with respect to the opioid crisis. The benefits of creating resiliency in Cabell County through the implementation of the efforts outlined in this proposal will permeate benefits across the county, the Appalachian region, and the rest of the nation. Understanding that this the opioid crisis is multigenerational in its effects, this plan is designed and constructed for long-term stability with all aspects having a built in sustainability framework.

The plan will serve as a model for responding to the impact of the opioid crisis in other communities so affected. The Institute will provide the means for assessing and evaluating innovative and evidence-based initiatives, and provide a center for regional and national dissemination and education regarding those initiatives. As the epicenter of the epidemic, Cabell County offers the ideal setting for implementing and evaluating creative evidence-based programs in prevention, early intervention, treatment, and recovery. The county is uniquely positioned to act as a community laboratory in the nation's continuing search for reliable solutions and offers an outstanding opportunity to contribute in a meaningful way to solving the local, regional, and national crisis.



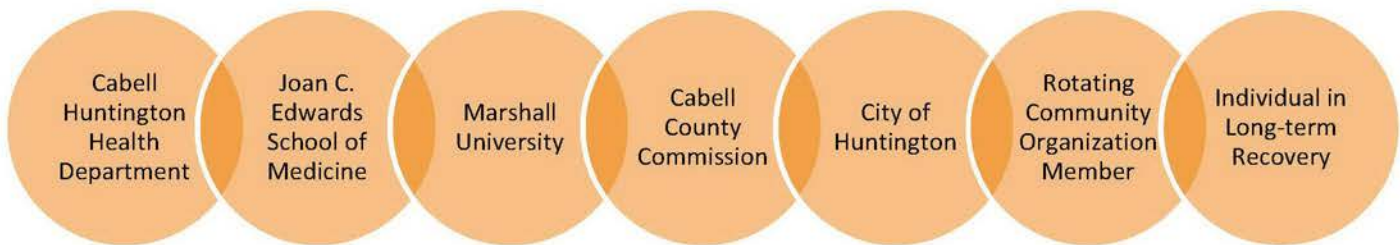
Allocation of Funds

| Area of Funding | Funds* | Examples of Expenditures |
|---|----------------------|---|
| Addiction Science Institute | \$175,000,000 | Development, construction, administration and oversight, operations, endowed faculty positions, and community engagement |
| Education | \$20,000,000 | Lifespan education including school-based and professional education, healthcare providers, comprehensive stigma reduction |
| Prevention | \$25,000,000 | Prevention and volunteer coordinators; implementation of prevention initiatives in both schools and community based settings |
| Early Intervention | \$15,000,000 | Comprehensive harm reduction services including testing, treatment, and mobile options; peer recovery; community health workers |
| Outpatient and Inpatient/Residential Services | \$50,000,000 | Expansion of MAT providers and services offered; hospital inpatient unit for treatment during hospitalization; increased capacity for addressing effects of SUD over the lifespan; more behavioral health services |
| Community Health/Social Supports | \$60,000,000 | Development of safe, supportive housing; method for reducing barriers to accessing social services; resources for children and families in foster or kinship care; safe childcare; transportation network; expansion of wraparound social support systems |
| Legal/Policy | \$7,000,000 | Community re-entry; comprehensive recovery and family court; advocacy and barrier reduction |
| Compassion Fatigue | \$10,000,000 | Services to address burn-out in first responders (police, fire, EMS, dispatch), health care professions, and others affected by compassion fatigue |
| Data/Research | \$75,000,000 | Comprehensive database development; research agenda and staffing; longitudinal research and dissemination |
| Workforce Readiness and Economic Development | \$100,000,000 | Ready workforce, social enterprise and start-up support; promoting a business-ready community; business infrastructure development; education and training opportunities |
| Total: | \$537,000,000 | |

***Each figure includes funding for the essential long-term (multi-generational) sustainability of all areas listed.**

Governance Structure

To govern the funds directed toward the Cabell County Resiliency Plan, a governing board will be established with volunteer representatives from the following five organizations: Cabell Huntington Health Department, Joan C. Edwards School of Medicine, Marshall University, the Cabell County Commission, and the City of Huntington. Additionally, this Board will include a rotating representative from the various county partners involved in addressing the opioid crisis, and an individual in stable recovery from Cabell County. The governing board will vote on the allocation and approval of funds, in line with this document's purpose and budget. Additionally, this governing board can vote on addendums to this plan to ensure that it acts as an organic, flexible document that stays in line with the current needs of the community. The board will establish appropriate procedures and reporting requirements to hold grant recipients accountable for the proper utilization of any and all funds provided. It will also insure the distribution of information regarding data, models of care, and outcomes for the benefit of other suffering communities.



There will be no controlling interests tolerated within the governing board. The governing board's actions will rely on the fundamentals of the resiliency plan in coordination with input from the collaborative community efforts centered in the Addiction Science Institute. The purpose of this structure is to guide the funds into the appropriate places, as well as follow-up on the successes and evaluation of where the funds are distributed to ensure adherence to this overall Resiliency Plan. This information, including distribution of funds and the progress of the efforts funded will be reported quarterly with public access so that the community can stay up to date on the changes these funds are creating in our community.